CERTIFICATE PERTAINING TO FOREIGN INTERESTS

(Type or print all answers)

FORM APPROVED OMB NO. 0704-0194

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PENALTY NOTICE

Failure to answer all questions or any misrepresentation (by omission or concealment, or by misleading, false or partial answers) may serve as a basis for denial of clearance for access to classified information. In addition, Title 18, United States Code 1001, makes it a criminal offense, punishable by a maximum of five (5) years imprisonment, \$15,000 fine or both, knowingly to make a false

statement or representation to any Department or Agency of the United States, as to any matter within the jurisdiction of any Department or Agency of the United States. This includes any statement made herein which is knowingly incorrect, incomplete or misleading in any important particular.

PROVISIONS

- 1. This report is authorized by the Statement of Defense, as Executive Agent for the National Industrial Security Program, pursuant to Executive Order 12829. While you are not required to respond, your eligibility for a facility clearance cannot be determined if you do not complete this form. The retention of a facility security clearance is contingent upon your compliance with the requirements of DoD 5220.22-M for submission of a revised form as appropriate.
- 2. When this report is submitted in confidence and is so marked applicable exemptions to the Freedom of Information Act will be invoked to withhold it from public disclosure.
- 3. Complete all questions on this form. Mark "Yes" or "No" for each question. If your answer is "Yes" furnish in full the complete information under "Remarks."

QUESTIONS AND ANSWERS

		YES	NO			
1.	(Answer 1a. or 1b.)					
	a. (For entities which issue stock): Do any foreign person(s), directly or indirectly, own or have beneficial ownership of 5 percent or more of the outstanding shares of any class of your organization's equity securities?					
	b. (For entities which do not issue stock): Has any foreign person directly or indirectly subscribed 5 percent or more of your organization's total capital commitment?					
2.	Does your organization directly, or indirectly through your subsidiaries and/or affiliates, own 10 percent or more of any foreign interest?					
3.	Do any non-U.S. citizens serve as members of your organization's board of directors (or similar governing body), officers, executive personnel, general partners, regents, trustees or senior management officials?					
4.	Does any foreign person(s) have the power, direct or indirect, to control the election, appointment, or tenure of members of your organization's board of directors (or similar governing body) or other management positions of your organizations, or have the power to control or cause the direction of other decisions or activities of your organization?					
5.	Does your organization have any contracts, agreements, understandings, or arrangements with a foreign person(s)?					
6.	Does your organization, whether as borrower, surety, guarantor or otherwise have any indebtedness, liabilities or obligations to a foreign person(s)?					
7.	During your last fiscal year, did your organization derive:					
	a. 5 percent or more of its total revenues or net income from any single foreign person?					
	b. In the aggregate 30 percent or more of its revenues or net income from foreign persons?					
8.	Is 10 percent or more of any class of your organization's voting securities held in "nominee" shares, in "street names" or in some other method which does not identify the beneficial owner?					

VES NO

Attachment 8

9.	personne	of the members of your organization's board of directo l, general partners, regents, trustees or senior managen ats for, any foreign person(s)?		
10.		ny other factor(s) that indicates or demonstrates a capa the operations or management of your organization?	bility on the part of foreign persons to control or	
		REMARKS (Attach additional sheets, if neces	sary, for a full detailed statement.)	
		CERTIFICAT	ION	
	I CERTIF		nd correct to the best of my knowledge and belief and are made	
WI	TNESSES:		(Date Certified)	
			Ву	
			(Contractor)	
NO	TE:	In case of a corporation, a witness is not required but the certificate below must be completed. Type or print names under all signatures.	(Title)	
			(Address)	
NO	TE:	Contractor, if a corporation, should cause the following of provided that the same officer shall not execute both the		
		CERTIFICAT	TE .	_

Attachment 8

I,					,	certify	tha	t I	am	the
of	the	cor	poration	named	as		Contractor	he	erein;	tha
who	signed	this	certificate	on	behalf	of	the	Contractor,	was	the
within the scop	e of its corpora	ate powers.								
							(Signature a	 und Date)		
		(Corpora	ite Seal)				(Signature t	2)		